FORM D

RECEIVED

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

### FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1381372

OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008

Estimated average burden hours per response ............................... 16.00

SEC USE ONLY							
Prefix Serial							
DATE RECEIVED							

Name of Offering (□ check if this is an amendment and name has changed, and indicate change.)  OCM Principal Opportunities Fund IV (Cayman) Ltd.							
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Sectorage of Filing: New Filing Amendment	on 4(6) ULOE						
A. BASIC IDENTIFICATION E	ATA HIMINIA HI						
1. Enter the information requested about the issuer	06062117						
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  OCM Principal Opportunities Fund IV (Cayman) Ltd. (the "Feeder Fund")							
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Walkers SPV Limited, Walker House, Mary Street, P.O. Box 908GT, George Town, Grand Cayman, Cayman Islands  Telephone Number (Including Area Code) (213) 830-6300							
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)  Telephone Number (Including Area Code)							
Brief Description of Business Investments primarily through OCM Principal Opportunities Fund IV, L.P. (the "Fund")							
Type of Business Organization    corporation	exempted company  THOWSON						
Actual or Estimated Date of Incorporation or Organization:    Month   Year	EActual						

### GENERAL INSTRUCTIONS

### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 ct seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SFC

Filing Fee: There is no federal filing fee.

### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

# FORM D

### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.								
Check Box(es) that Apply:	■ Promoter	■ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if Oaktree Capital Management,								
Business or Residence Addres c/o Oaktree Capital Manageme	s (Number and Streent, LLC, 333 South	cet, City, State, Zip Code) h Grand Avenue, 28 <sup>th</sup> Floor,	Los Angeles, CA 90071					
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer*	Director	General and/or Managing Partner*			
Full Name (Last name first, if Marks, Howard S.	`individual)							
Business or Residence Addres c/o Oaktree Capital Manageme	s (Number and Streent, LLC, 333 South	eet, City, State, Zip Code) n Grand Avenue, 28th Floor,	Los Angeles, CA 90071					
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer*	Director	General and/or Managing Partner*			
Full Name (Last name first, if Karsh, Bruce A.	`individual)							
Business or Residence Addres c/o Oaktree Capital Managem	s (Number and Streent, LLC, 333 South	eet, City, State, Zip Code) h Grand Avenue, 28th Floor,	Los Angeles, CA 90071					
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer*	Director	General and/or Managing Partner*			
Full Name (Last name first, if Masson, Richard	individual)	•						
Business or Residence Addres c/o Oaktree Capital Manageme	s (Number and Streent, LLC, 333 South	eet, City, State, Zip Code) h Grand Avenue, 28th Floor,	Los Angeles, CA 90071					
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer*	Director	General and/or Managing Partner*			
Full Name (Last name first, if Stone, Sheldon	individual)							
Business or Residence Addres c/o Oaktree Capital Manageme	s (Number and Streent, LLC, 333 South	eet, City, State, Zip Code) n Grand Avenue, 28 <sup>th</sup> Floor,	Los Angeles, CA 90071					
Check Box(es) that Apply:	[-] Promoter	Beneficial Owner	■ Executive Officer*	Director	General and/or Managing Partner*			
Full Name (Last name first, if Keele, Lawrence	individual)							
Business or Residence Addres c/o Oaktree Capital Manageme	s (Number and Streent, LLC, 333 South	eet, City, State, Zip Code) h Grand Avenue, 28 <sup>th</sup> Floor,	Los Angeles, CA 90071					
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer*	Director	General and/or Managing Partner*			
Full Name (Last name first, if Kirchheimer, David M.	individual)		<del>-</del>					
Business or Residence Addres c/o Oaktree Capital Manageme	s (Number and Streent, LLC, 333 South	et, City, State, Zip Code) h Grand Avenue, 28th Floor,	Los Angeles, CA 90071					
**	* of the director	of the Fund.		•				

## FORM D

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

· ·					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer*	Director	General and/or Managing Partner*
Full Name (Last name first, if Frank, John B.	individual)	<u> </u>		. 1,	
Business or Residence Addres c/o Oaktree Capital Manageme	s (Number and Streent, LLC, 333 Sout	cet, City, State, Zip Code) h Grand Avenue, 28th Floor,	Los Angeles, CA 90071	•	
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer*	Director	General and/or Managing Partner*
Full Name (Last name first, if Clayton, Kevin	individual)		<u></u>		
Business or Residence Addres c/o Oaktree Capital Manageme	s (Number and Streent, LLC, 1301 Ave	eet, City, State, Zip Code) enue of Americas, 34 <sup>th</sup> Floor	, New York, NY 10019		
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer*	Director	General and/or Managing Partner*
Full Name (Last name first, if Kaplan, Stephen A.	individual)	<del>- ,</del>			
Business or Residence Addres c/o Oaktree Capital Manageme	s (Number and Streent, LLC, 333 South	eet, City, State, Zip Code) n Grand Avenue, 28th Floor,	Los Angeles, CA 90071		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	`individual)				
Business or Residence Address	s (Number and Stre	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	`individual)				
Business or Residence Addres	s (Number and Stre	et, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	i Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	s (Number and Stre	et, City, State, Zip Code)	<u> </u>		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	`individual)	<u> </u>	<del>_</del> ,,		
Business or Residence Addres	s (Number and Stre	et, City, State, Zip Code)			
	* of the director	of the Fund			

					B. INFO	DRMATIC	N ABOUT	OFFERI	NG				
													Yes No
1. Has t	he issuer sold	, or does th	e issuer inte	end to sell, 1	o non-accre	edited inves	stors in this	offering?					
				Ans	wer also in	Appendix,	Column 2,	if filing und	der ULOE.				
2. What is the minimum investment that will be accepted from any individual?										\$3,000,000*			
* Capital commitments of lesser amounts may be accepted.											Yes No		
3. Does the offering permit joint ownership of a single unit?											<b>x</b> -		
solici regist	the informati tation of purc ered with the r or dealer, ye	hasers in co SEC and/o	onnection w r with a stat	rith sales of te or states,	securities in list the nam	n the offering oe of the bro	ng. If a pers oker or deal	on to be lis	ted is an as:	sociated pe	rson or ager	nt of a broke	eration for er or dealer ed persons of such a
Full Name	(Last name f	irst, if indiv	/idual)			-							
OCM Inve	stments, LLC									_			
								· · · · · · · · · · · · · · · · · · ·		·			
	Grand Avenu			eles, CA 90	0071								
Name of A	ssociated Bro	ker or Deal	er										
										,			
	hich Person I												M Aller
,	k "All States"												☑ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
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Business of	Residence A	ddroes (Nu	mber and S	treet City	State Zin C	'ode)							
Dusiness of	Residence A	iddicaa (ivu	moer and 3	acci, City,	orare, zip c	,ouc,							
Name of A	ssociated Bro	ker or Deal	er .					_			<u></u>		
	550014100 2510												
States in W	hich Person I	isted Has S	Solicited or	Intends to	Solicit Purc	hasers							<u> </u>
(Chec	k "All States'	" or check i	ndividual S	tates)							.,		☐ All States
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(MT)		[NV]	[NH]	[rn]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[ປ]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	(Last name f	irst, if indiv	idual)										
Business or	Residence A	ddress (Nu	umber and S	Street, City,	State, Zip (	Code)							
Name of A	ssociated Bro	ker or Deal	er						·				
States in W	hich Person I	isted Has	Solicited or	Intends to	Solicit Purc	hasers							· · · · · ·
(Chec	k "All States	" or check i	ndividual S	tates)			**************						☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	{WV]	[WI]	[WY]	[PR]	

Type of Security	Aggregate	Amount Already Sold
	Offering Price	
Debt		
Equity	\$2,500,000,000*	_ \$45,550,000
<b>☑</b> Common □ Preferred		
Convertible Securities (including warrants)	\$0	
Partnership Interests	\$0	
Other (Specify)	\$0	
Total	\$2,500,000,000	_ \$43,350,000
Investments in the Fund, which may accept total capital commitments in excess of this amount, may be made directly or through the Feeder Fund.		
Answer also in Appendix, Column 3, if filing under ULOE.		
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Monthe	Aggregate Dollar Amount
	Number Investors	of Purchases
Accredited Investors	3	\$43,350,000
Non-accredited Investors	0	\$0
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.	-	
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Security	Dollar Amount Sold
Type of offering		_ s
Rule 505		s
Regulation A	<del></del>	\$
		_ s
Rule 504		s
Total	_	
Total		
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an		≅ \$0
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees		≅ \$*
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees		¥ \$*
Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs.  Legal Fees.  Accounting Fees		E S*E  E S*
Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs  Legal Fees  Accounting Fees  Engineering Fees		<pre>     S*     S*     S     S*     S     S     S </pre>
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees  Printing and Engraving Costs  Legal Fees  Accounting Fees		≥ \$0 ≥ \$* ≥ \$* ≥ \$0 ≥ \$0 ≥ \$**

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

4 of 8

b.	Enter the difference between the aggregate offering price given in response to Part C - Question 4.a. This difference is the "adjusted gross pro						
5.	5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used foreach of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.						
				Payments to Officers, Directors, & Affiliates	Payments To Others		
	Salaries and fees			\$	O\$		
	Purchase of real estate			\$	<b></b>		
	Purchase, rental or leasing and installation of machinery and equipmer	ıt		\$	□\$		
	Construction or leasing of plant buildings and facilities			\$	<b>= \$</b>		
	Acquisition of other businesses (including the value of securities involused in exchange for the assets or securities of another issuer pursuant		\$	<b>a</b> \$			
	Repayment of indebtedness		\$	□\$			
	Working capital		\$	<b></b>			
	Other (specify): Investments in the Fund	122	<b>3\$</b> 2,500,000,000	B\$			
			\$	G\$			
	Column Totals	<u>0</u>	<b>3\$2,5</b> 00,000,000	□\$			
	Total Payments Listed (columns totals added)		⊠\$2,500,000,000				
	D PERF	RAL SIGNATURE					
ап	e issuer has duly caused this notice to be signed by the undersigned duly aut undertaking by the issuer to furnish to the U.S. Securities and Exchange Connaccredited investor pursuant to paragraph (b)(2) of Rule 502.	horized person. If this	notice is filed under request of its staf	r Rule 505, the follow f, the information furn	ving signature constitutes nished by the issuer to any		
Iss	uer (Print or Type)	napare	<i>Y</i>	Date			
00	CM Principal Opportunities Fund IV (Cayman) Ltd.	(m).	<del></del>	October 31,			
	11.7	le of Signer (Print or T					
Br —	ian Beck Sc	nior Vice President, Le Principal Opportuniti			, the director of OCM		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

## **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)